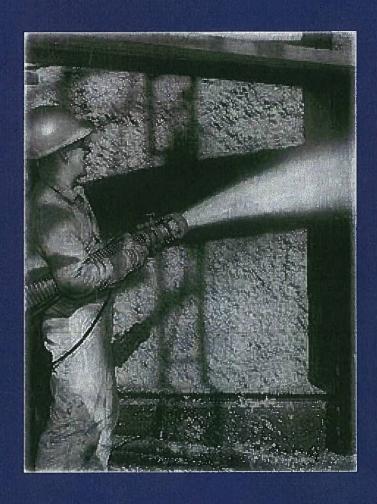
INDUSTRIAL HYGIENE and SEM TRAINING



FY 2010

SITE EXPOSURE MATRICES (SEM)/IH TRAINING AGENDA

NATIONAL OFFICE (October 13 & 15)

8:30	8:45	Introduction	Janice Ruggles
8:45	10:00	SEM Overview	Keith Stalnaker
10:00	10:15	Break	
10:15	11:00	SEM Overview	Keith Stalnaker
11:00	Noon	SEM Policy Implementation	Janice Ruggles
Noon	1:00	Lunch	
1:00	2:00	IH Referral Presentation	David Levitt/Larry Payne
2:00	2:15	Break	
2:15	5:00	IH/SEM Case File Workshop	Keith Stalnaker, David Levitt & Larry Payne

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Department of Labor Site Exposure Matrices Training

October 2009

2009 Site Exposure Matrices (SEM) Training

Site profile status

Changes in SEM since last year

Important issues for review

Questions and answers

Site profile status Initial profiles

- 98 profiles completed
 - All major sites have SEM profiles
 - All but five of the small sites that are to be profiled are complete
 - Major site "revisits" are on-going

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Site profile status SEM document "revisits"

- Why are we doing revisits?
- Completed: ETTP, Idaho National Lab, Paducah, Portsmouth, Rocky Flats, Sandia-NM, Sandia-CA, Santa Susana Field Lab, Savannah River, SLAC, Y-12
- Average increase in data exceeds 100 percent
- Yet to be completed: 21 other major sites

Site profile status New sites to be profiled

- New sites
 - Princeton Plasma Physics Lab
 - Environmental Measurement Lab
 - Connecticut Aircraft Nuclear Engine Laboratory
 - Lab of Radiobiology and Environmental Health
 - GE Vallecitos
- When above sites are finished, all the sites scheduled to be profiled will be "complete"
 - SEM will continue to be updated as new information is found
 - PLEASE let Janice know when you get documentation of information that is not in SEM via your SEM POC 5

SEM chemical profile status

- 9100 toxic substances currently in SEM
 - 1300 new substances will be added by end of CY2009
- 4480 toxic substances have chemical profiles
 All commonly used substances have profiles
- 2350 changes in disease associations are projected to be made in SEM by the end of CY2009
 - New toxic substances
 - Deleted associations for existing substances
 - New associations for existing substances

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What is Haz-Map?

- For SEM toxic material-disease relationships, DOL uses Haz-Map
- Haz-Map is a database of occupational diseases and commonly used occupational substances
- Haz-Map is updated continually as new medical research findings are released
- SEM updates as Haz-Map changes

Haz-Map Review

- Haz-Map is maintained and controlled by the National Institutes of Health/National Library of Medicine
 - It is not a DOE or DOL database
 - Contents are not exclusive to DOE facilities
 - Disease links based on medical and health research and studies
 - A small study, by itself, is not adequate to establish a new disease link

Haz-Map Review (cont'd)

 If an accepted disease link is not related to occupational exposures, it is not inserted in Haz-Map, e.g., diabetes

Haz-Map vs SEM

- The number of substances in SEM exceeds the number in Haz-Map
 - Many unique or uncommon toxic substances used in DOE facilities
- However, for toxic materials that are in both Haz-Map and SEM, the disease associations are the same

10

Haz-Map vs SEM

- CE does not use Haz-Map to support decision making
 - CE should draw information from SEM
 - Haz-Map has substances that are not used in DOE facilities
 - Haz-Map has diseases that do not apply to DOE facilities

11

Haz-Map health profile status

- Substances published in Haz-Map by NLM
 - **2006: 73**
 - **2007: 61**
 - **2008: 412**
 - 2009: 449 to date
 - 2009: 777 (estimated)

Haz-Map is the most robust toxic substance database available

- Haz-Map: 2800 substances
 - 2200 are in SEM
- NIOSH Pocket Guide to Hazardous Chemicals: 677
- International Chemical Safety Cards: 1646
- ATSDR: 275
- OSHA Safety and Health Guides: 250 (approx.)

13

Why does DOL use Haz-Map?

- It is dedicated to occupational exposures
- It uses only widely accepted and researched occupational disease associations
- · Peer reviewed process
- Implemented through NIH/NLM

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Haz-Map limitations

- Haz-Map and SEM do NOT include information on the aggravation of existing diseases
 - Aggravation and contribution are covered by Part E
 - Synergism effects are not widely recognized in scientific literature and if claimed must be supported with proper documentation and rationalized medical evidence
 - Chemical-chemical
 - Chemical-radiation
- Above situations have to be evaluated by DOL on a case-by-case basis

Using SEM information

- SEM is not a stand alone decision tool
- Please do not: Deny claim because the information is not in SEM
- SEM reports <u>potential</u> exposures
 - SEM may tell you that Y-12 electricians used lead, but it does not tell you that Joe Smith, Y-12 electrician,
 - SEM does not quantify exposures; it will not tell you how much lead Joe Smith used or was exposed to
 - Get IH assistance with this evaluation
 - More on this later today

Ionizing radiation

- Non-cancer health effects are covered by Part E
 - Aplastic anemia
 - Cataract, chemical or radiation induced
 - Radiation sickness, acute

Trade name substances

- 1536 trade name substances are now being added to SEM
 - Claimants often refer to trade names
 - Sometimes in Occupational History Questionnaire (OHQ)
- Shown in SEM in same manner as any other toxic substance
 - Example: GE012A Silicone Rubber Compound might be found in an OHQ
 It is now in SEM

Changes in SEM in 2009: New banner on each SEM page

- Added new banner to remind users that the information is not complete
 - Why needed?
- SEM printouts from claim files are showing up on the Internet
 - Some indication that one or more groups are cooperating to collect these printouts from claimants
 - Incorrect interpretations by untrained persons
 - Confusion results
- "Print View" feature deleted

19

Changes in SEM in 2009: Toxic material prefilter

- On the "toxic substance information" page of SEM, select the first letter or number of the substance you are looking for
 - Example: Gluconic acid
 - Select: "G"
 - List of substances is truncated to just those starting with "G"
 - Scan down the dropdown menu to find the acid
- Easier to find a toxic substance

20

Coming attractions: SEM mailbox

- Will allow Claims Examiners and others to ask the SEM team technical questions and get answers <u>quickly</u>
- How to use or interpret SEM information; request for additional information; research of documents in SEM library; other
- Expedited contact with the DOE site Point of Contact
 - New documents
 - Clarification of building/labor category/work processes

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Coming attractions: Evaluating closed claims

- Adjudication Report (aka "SEM QA Plan")
 - Evaluates impact of SEM updates on adjudicated claims & claims in progress
- Identifies new toxic substance-disease links by site
- Potential reopening
 - Two reports
 - BAS report will match specific claims
 Real time report on the SEM website
- Demonstration of real-time report

Review: Worker categories at DOE

- Production workers
 - Employees of the DOE prime operating contractors (e.g., Union Carbide or DuPont)
- Construction workers
 - Employees of DOE prime construction contractors
 - Employees of construction subcontractors
 - May be several tiers deep

Review: Using SEM

- You MUST know if the claimant is a production worker (i.e., worked for the company that operated the site) or a construction worker
- The answer dictates how you use SEM and do your search

Review

Do not cite SEM as the reason a claim is being denied

- If SEM does not have needed information, use other sources (e.g., DAR & the occupational history interview, DMC referral)
- SEM is not 100% complete and never will be

26

Review

- Do not submit long lists of toxic substances as part of IH referrals
 - Delays IH response
 - Example: Electrician at PORTS
 - PORTS list (745)
 - PORTS electrician list (65)
 - PORTS electrician/transformer maintenance list (3)
- More on this topic later today

21

Review

- If you cannot find the labor category in SEM, then look at the work processes
- Example: Fermi National Accelerator Lab fire fighter claim
 - "Fire fighter" not listed in the SEM labor categories for the site
 - Work process: Fire fighting
 - What other work process might be used?

Review

- When using "work process" to search:
 - Look at all the possible work processes that may apply
 - Use all that apply
 - Develop composite profile
- Example: Mound printing services
 - Use both "Print Shop activities" and "printing services"

28

Review

- Finding a chemical in SEM
- Some are "easy": Argon or Nickel
- Some are not: Tetraphenylnapthalene
 - How would you search for this substance?

20

Review

- Finding Tetraphenylnapthalene in SEM
- Look in drop down menu
 - For what?
 - Cautions when using this approach
- Alias search
 - Results?
 - Cautions when using this approach
 - Search "smart"

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Example	es:	#1
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- Use SEM to evaluate the following:
- A former chemical operator at the Paducah GDP files a claim for bronchiolitis obliterans and toxic pneumonitis. He worked at the site in Bldg. C-410 from 1965-1975.

31

Examples: #2

- A Savannah River electrician files a claim for his recently diagnosed chronic renal disease. He has previously been diagnosed with acute tubular necrosis. His work history shows instrument maintenance, including circuit board work, as a major activity.
- What can we learn from SEM?

32

Examples: #3

- A Rocky Flats worker's claim reports that he worked in the Material and Process Development Lab as a research specialist. He claims that work exposures caused his asthma.
- What can SEM tell us?

Use the SEM User's Guide

- Available on the DOL Server
 - Making a hardcopy will facilitate use
- Step-by-step guidance
- How to search
- Search parameters
- Screen displays
- How to get assistance

Protocol for feedback

■ Coordinate all policy/procedural questions through your supervisor.

When you need help

Computer issues/log-in and access

- Steve Rudy, SEM Site AdministratorPhone: 614-638-8159
- Email: <u>rudy@stevenwrudy.com</u> or <u>srudy1@earthlink.net</u>

Technical assistance/other help

Contact your supervisor

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Questions?	

Site Exposure Matrices (SEM)



POLICY OVERVIEW

10/21/2009

Purpose of SEM

- SEM designed as a development tool
- SEM data = **potential** exposure
- Repository of information
 - Site investigations
 - Worker Roundtables
 - Evidence submitted (i.e. SEM website)
 - Haz-Map disease links to toxic substances
- Assist DEEOIC in evaluating causation

10/21/2009

Causation Triad

Employment

- Covered Part E employment
- Exposure
 - Established workplace exposure
- Medical
 - Covered illness meets diagnostic criteria

10/21/2009

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Evidence as a Whole

- Claimed condition and employment
- Evaluate the potential exposures based upon employment
- Is there a <u>plausible</u> relationship between the employment, exposure and illness?
 - Putting all of the pieces of the puzzle together
 - Evaluate evidence and let it tell its story

10/21/2009

3

Establishing Exposure

- Potential that toxic substance was <u>present</u> at the facility and employee came into <u>contact</u> with such toxic substance
- <u>Presence</u> and <u>Contact</u> Key Elements
 - Facility
 - Identify building, area, or mine, etc.
 - Work description and work process

10/21/2009

4

SEM Not a Decision Tool

- SEM is not a stand alone decision tool
- Three exceptions:
 - Acceptances from the evidence
 - National Office Bulletins
 - Presumptive links
 - Covered Illness Matrix
 - E-500 Exhibit #2
 - All diagnostic criteria met

0/21/200

Weigh Evidence & Decide

- Upon weighing all evidence of file can the claim be accepted or denied
 - Conduct all **reasonable** development
- Be confident of your opinion as a claims professional and make a sound decision based upon the evidence
 - Show your reasoning in the decision
- Do you need expert assistance?
 - Medical opinion or exposure question?

10/21/2009

6

Industrial Hygienist

- Go to IH first before DMC
- Evaluate potential exposure due to labor category or process (route of exposure)
 - (i.e. welding and fume inhalation)
- Targeted questions & detailed SOAF
 - Outline what you have and what you need
 - Frame question (i.e. route of exposure)
- DO NOT SEND LAUNDRY LIST OF EXPOSURES (i.e. print out from SEM)

10/21/2009

DMC Referral

- Causation determination
- Diagnostic interpretation
- Diagnosis not in question but relationship between illness and verified toxic substance is required
- Is illness path indicative of toxicity or natural cycle?
 - occupational exposure or heredity/lifestyle

10/21/200

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FAB Review

- FAB ensures no new exposure information added to SEM since RD that <u>affects</u> decision outcome
 - Check "Record History" for modified date
 - ECMS Notes entry no printing unless change
- **No remand** based on SEM if no change or if change with <u>no impact</u> on decision
- Remand only when info affects decision
- Issue rationalized decision

10/21/200

12

Reopening Review

- Ensure latest search result
 - A toxic substance or disease link may have been added while case under NO review
- Ensure that DO & FAB searched properly
- Bring new evidence to SEM Coordinator
 - Verifiable exposure information (DOE doc)
 - Scientifically rationalized studies linking toxic substances to occupational illnesses

10/21/2009

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Any Questions?



	
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Anders The response for Question #2 of the 1/09/08 Policy teleconference states: The guidance in E-5004j(2) indicates that the CE should always check SEM one last time before issuing a decision to ensure the most recent information is being used. The CE inputs this action in ECMS notes and does not need to print new search results unless information is found that is pertinent to the decision being rendered. Ch. 2-0700.11a of the PM states: Recommended Decision. Prior to issuing a recommended decision (RD) denying benefits, the CE must ensure that the most updated version of the SEM data is contained in the case file and referenced properly in the decision. This is done by double checking the search initially conducted to make certain that an element not found in the initial search (i.e., a toxic substance) has not been added to the SEM since the date of the initial search. The CE prints out the results of the new search immediately prior to issuing the RD. Following the above guidance, what does the CE do when an IH and CMC referral has been completed on a list of toxins, but when they search SEM before issuing the RD, they find that one of the chemicals is no longer found? The reason for checking SEM prior to issuance of a decision is to make certain no new links have been added during the process of development. In those instances in which links have been removed, the opinion of the IH, in conjunction with a CMC opinion, is still considered sufficiently probative and the opinion can move forward even if SEM has deleted

links. The IH is aware of links that are removed from SEM and would

have already assessed that in the opinion.

FAB Review

- FAB ensures no new exposure information added to SEM since RD that <u>affects</u> <u>decision outcome</u>
 - Check "Record History" for modified date
 - ECMS Notes entry no printing unless change
- Change/no change with no impact on decision – no remand based on SEM
- Remand only when info affects decision
- Issue rationalized decision

09/30/2009

12



National Office Review

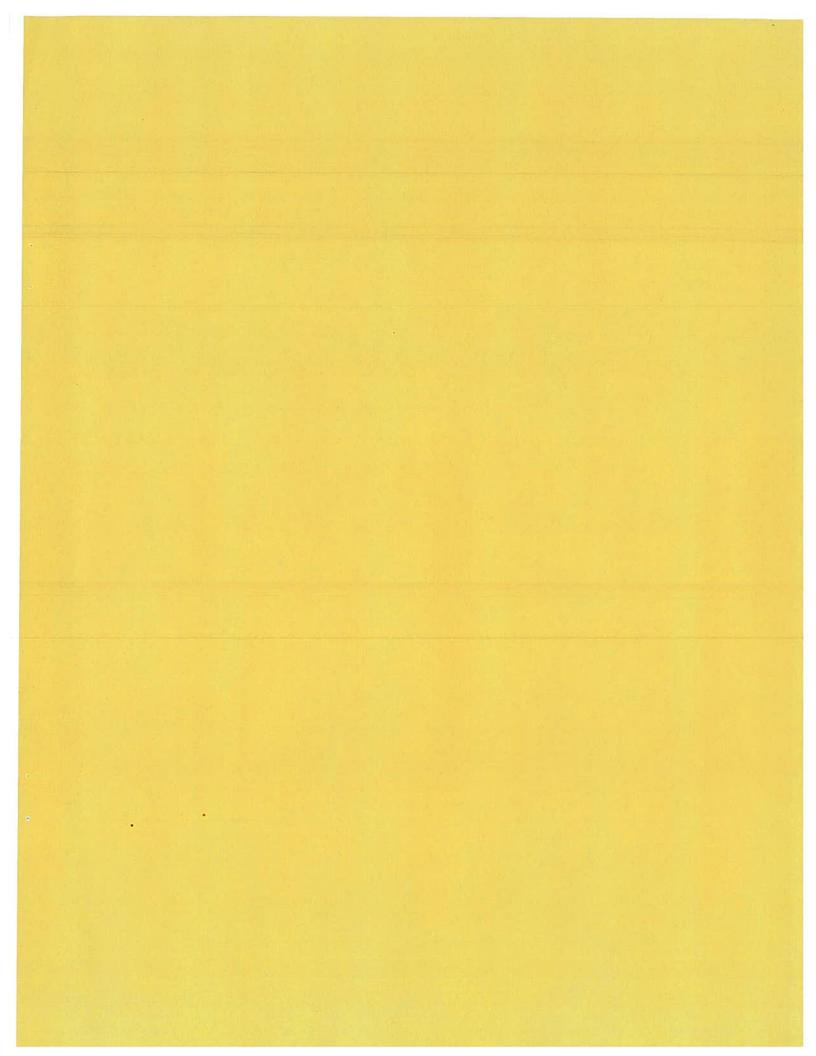
- Ensure latest search result
 - A toxic substance or disease link may have been added while case under NO review
- Ensure that DO & FAB searched properly
- Bring new evidence to SEM Coordinator
 - Verifiable exposure information (DOE doc)
 - Scientifically rationalized studies linking toxic substances to occupational illnesses

09/30/2009

13

Any Questions?





Industrial Hygiene (IH) Referrals and Statement of Accepted Facts (SOAFs)

October 2009

IH Referrals and SOAFs

Topics to be covered:

- ➤ What is an IH Referral?
- ➤ When should a CE consider submitting an IH Referral?
- > What will an IH do with the referral?
- > Limitations of an IH report.
- How to develop a Good and Complete SOAF.
- > <u>DO's</u> and <u>DON'Ts</u> for IH Referral Questions.

What is an IH Referral?

- > A resource available to CEs to help develop Part E claims.
- > Helps the CE determine the likelihood of exposure to specific chemicals.
- Helps the CE determine the likely frequency, duration and extent of potential exposure(s)—the cumulative dose is the key!
- > Helps the CE decide whether the claim should be reviewed by a District Medical Consultant (DMC).
- ➤ May be useful to DMCs in determining the likelihood of disease etiology (causation, contribution, aggravation, etc.).

When should a CE consider an IH Referral?

- > When the claimant's condition/disease is linked to toxic materials that were present in the workplace.
- When the SEM indicates that specific chemicals with a recognized causal relationship to a claimant's disease/condition were present at the work location.
- ➤ When the OHQ indicates the claimant worked directly with or around specific agents related to the condition/disease.
- > When the CE needs someone familiar with DOE sites, DOE work practices and general industrial processes to review the information.

Types of Referrals

- > IH referrals evaluate the potential and extent of claimant exposures to toxic materials.
- > Toxicology referrals evaluate whether a particular toxin is likely to be causally related to a specific medical condition. Such referrals are warranted when no connection is identified in SEM and the claimant provides scientific literature (human studies) documenting a connection. In some cases, both a toxicology referral and an IH referral are necessary.
- HP referrals are necessary for evaluating a claimants exposure to ionizing radiation.

Anema

Cata-acts

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What will the IH do with the Referral?

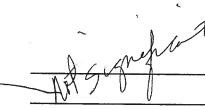
- > The IH will review the information that the CE has obtained, as detailed in the SOAF, and contained in other supporting materials (i.e. the OHQ, etc.).
- > The IH will review and verify the information provided in SEM.
 - > Work classification
 - > Job processes
 - > Area/building/facility chemical inventory
- > Disease/condition
- The IH will develop and report an opinion based upon the facts of the claim, the information available through SEM, and professional judgment regarding the likelihood and extent of any exposure(s).
- The cumulative "dose" is the key--the mere presence of an agent does not necessarily equate to exposure.

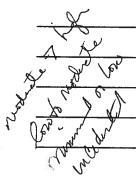
IH Referrals, (con't)

- Remember: industrial hygienists are not "medical doctors" and cannot provide medical opinions.
- It is very rare to find IH monitoring data; however, if such materials are available in the claimant's file be sure to forward as part of the referral package.
- Review SOAF and questions carefully before sending (e.g. Was Mr. Jones exposed to skin cancer, which is known to cause arsenic?)

Incidental Exposures

- > Often, IH reports refer to "incidental exposures."
- > Incidental exposures are exposures that an individual experiences "in passing only."
- For example, someone who delivers materials to a laboratory could be expected to experience "incidental exposures" to chemicals being worked with (i.e., benzene, acetone, etc.). Nevertheless, it is the employees who directly work with these materials on a day-to-day basis that are at risk for significant exposures.
- > Incidental exposures are not to be considered significant.





Statement of Accepted Facts (SOAF)

Each page should include (at the top or bottom)

- > The Employee Name
- > Case Number
- > The originating District Office location
- > The Claims Examiner's Name

Page numbers (1 of 3, 2 of 3, etc.) would be helpful.

- 1. Employee Information
 - a. Name:
 - b. Case File Number:
 - c. Date of Birth:
 - d. Date of Death:
 - i. If deceased, list Cause(s) of Death from Death Certificate
 - -- Cause of Death:
 - -- Cause of Death:
 - --Cause of Death:
 - ii. If deceased, list the claimant
 - e. Is the claimant part of an identified Special Exposure Cohort (SEC)? Please identify/specify this cohort:

SOAFs

2. Claim History

Provide significant events such as

- > Date of filing of Part B
- > Date of filing of Part E
- > Date submitted to NIOSH for dose reconstruction
- > Probability of Causation % (exact number, please)
- > Date of denial/acceptance
- > Date of remanded claim, etc.

Please include claimed illnesses for each claim and any accepted conditions.

SOAFs

- 3. Employment Information
 - 3a. Facility

(Note: make sure each is covered under EEOICPA)

- i. Facility A:
- ii. Facility B:
- iii. Facility C:

- 3b. Work Timeframe(s) Claimed
- > Facility A:
- > Facility B:
- > Facility C:
- 3c. **VERIFIED** Work Timeframe(s)

(Note: make sure each is covered under EEOICPA)

- ➤ Facility A:
- > Facility B:
- > Facility C:

13

SOAFs

- 3d. Job Title(s)/Classification(s) Claimed (where possible, include time period for each)
 - ▶ Job A:
- > Job B:
- > Job C:
- 3e. <u>VERIFIED</u> Job Title(s)/Classification(s) (where possible, include time period for each)
 - > Job A:
 - > Job B:
 - > Job C:

SOAFs

- 3f. Claimed Job Description(s) and Work Processes
- ➤ Job A:
- > Job B:
- > Job C:
- 3g. <u>VERIFIED</u> Job Description(s) and Work Processes (IMPORTANT: be as specific as possible regarding individual work activities and processes.)
 - > Job A:
 - > Job B:
 - > Job C:

- 3h. Facility(s), Area(s), Building(s) Claimed
 - > Job A:
 - > Job B:
 - > Job C:
- 3i. VERIFIED Facility(s), Area(s), Building(s)
- > Job A:
- > Job B:
- > Job C:

SOAFs

- 3j. Non-Covered Employment (Include employer and dates of employment)
- > Employer A (with dates):
- > Employer B (with dates):
- > Employer C (with dates):

SOAFs

- 4. Medical Information
 - a. Has an Occupational History Questionnaire (OHQ) been completed?
 - Diagnosed Condition (provide date of diagnosis for each; if diagnosed condition is skin cancer, provide location on the body)
 - > Diagnosed Condition A (include date of diagnosis and location if applicable):
 - > Diagnosed Condition B (include date of diagnosis and location if applicable):
 - > Diagnosed Condition C (include date of diagnosis and location if applicable):

5. Site Exposure Matrices (SEM) Search Results

Present the SEM Search Summary

If other pertinent information/evidence (other than SEM) is available, please discuss.

10

SOAFs

6. Claims Examiner Information

- > Submitting District Office:
- > Claims Manager:
- ➤ Unit designation:
- ➤ Telephone Number:
- ➤ E-mail address:
- > Date of referral:

SOAFs

7. Other Information

Include any other information that may be useful to those conducting the referral evaluation (OHQ, Former Worker Health Protection Program examination/interview, etc.)

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8. Verification of Review

The referral should be signed by the Claims Examiner's supervisor (a Senior CE or a Claims Manager) indicating that the referral information has been reviewed and meets minimum criteria for submittal.

SOAFs

Last page:

Specific Question(s) for IH Referral

Question 1:

Question 2:

Guidance for IH Referral Questions

DO:

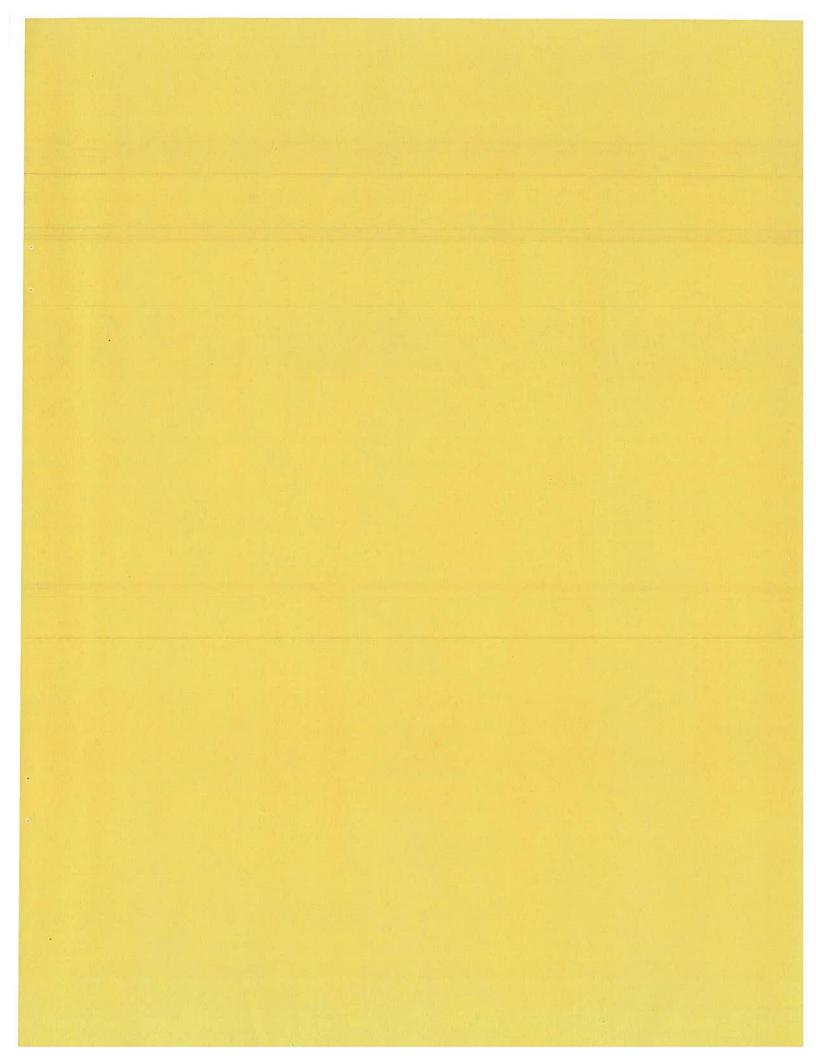
- > Limit questions to whether the claimant may or may not have been exposed to particular material(s), the route(s) of exposure(s), and the likely duration/extent of exposure(s).
- > List the specific material(s) in question.
- > Be specific with the question(s).
- > Assume the presence of asbestos.

...

Guidance for IH Referral Questions

DON'T:

- > Refer to a "laundry list" of materials listed in the SOAF/SEM research.
- > Ask the IH about exposure to radioactive materials unless the toxicology of the substance is associated with its non-radioactive properties (e.g. uranium) and it correlates with a diagnosed medical condition. Additional guidance will be forthcoming that will address non-cancerous health condition potentially caused by ionizing radiation (e.g. cataracts).
- > Ask the IH to address issues of causation or speculate about what agents may have been responsible for a particular disease or condition
- > Ask the IH about the validity of a claimant's request to reopen a claim.



Employee Name:	Case Number:
District Office:	CE:

Statement of Accepted Facts (SOAF)

For the DEEOIC Industrial Hygienist

As shown above, each page should include (at the top or bottom)

- > The Employee Name
- > Case Number
- > The originating District Office location
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Page numbers (1 of 3, 2 of 3, etc.) would be helpful.)

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- e. Is the claimant part of an identified Special Exposure Cohort (SEC)? Please identify/specify this cohort:

2. Claim History

Provide significant events such as

- Date of filing of Part B
- > Date of filing of Part E
- > Date submitted to NIOSH for dose reconstruction
- > Probability of Causation % (exact number, please)
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- > Date of remanded claim, etc.

Please include claimed illnesses for each claim and any accepted conditions.

3. Employment Information

a. Facility

(Note: make sure each is covered under EEOICPA)

- Facility A:
- > Facility B:
- ➤ Facility C:
- b. Work Timeframe(s) Claimed
 - > Facility A:
 - > Facility B:
 - Facility C:

Employee Name:		Case Number:		
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	> Job C:			
e.	. <u>VERIFIED</u> Job Title(s)/Cl			
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	activities and processes.			
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	Job B:			
	Job C:			
i.	VERIFIED Facility(s), Are	ea(s), Building(s)		
	➤ Job A:			
	➤ Job B:			
	> Job C:			
j.	Non-Covered Employme			
	(Include employer and da	·		
	Employer A (with			
	Employer B (with			
	Employer C (with	n dates):		

Employee Name:	
District Office:SO/	CE:
SO	AF continued
 b. Diagnosed Condition (procondition is skin cancer, Diagnosed Condition applicable): Diagnosed Condition applicable): 	tory Questionnaire (OHQ) been completed? ovide date of diagnosis for each; if diagnosed provide location on the body) A (include date of diagnosis and location if B (include date of diagnosis and location if C (include date of diagnosis and location if
5. Site Exposure Matrices (SEM) Present the SEM Search Summ If other pertinent information/evi discuss.	
 6. Claims Examiner Information Submitting District Office Claims Manager: Unit designation: Telephone Number: E-mail address: Date of referral: 	·
7. Other Information	
Include any other information referral evaluation (OHQ, Forexamination/interview, etc.)	n that may be useful to those conducting the rmer Worker Health Protection Program
8. <u>Verification of Review</u>	
Senior CE or a Claims Mana	d by the Claims Examiner's supervisor (a ger) indicating that the referral information ts minimum criteria for submittal.
Last Page	
Specific Question(s) for IH Referral	

Question 1:

Question 2:

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